



## NOTICE OF SOLICITATION

**Serial # - PH RFQ 09-014**

**REQUEST FOR QUOTES FOR: Teen Outreach Program (TOP) Parent Mobilizer**

The Maricopa County Procurement Code ("The Code") governs this procurement and is incorporated by this reference. Any protest concerning this request for bids must be filed with the Procurement Consultant in accordance with Section MC1-905 of the Code.

### **Requirements to Apply:**

Submit a letter of interest detailing qualifications, proposed budget, and all attachments **no later than 2:00pm, September 22, 2008** to:

Cheryl Rentscheler  
Procurement Officer  
Maricopa County Department of Public Health  
4041 N. Central Avenue, #1400  
Phoenix, Arizona 85012  
(602) 506-6886 phone  
(602) 506-6885 fax

**\*\* Please include one (1) original and four (4) copies of your submittal.**

**In order to be considered for this solicitation the documents enumerated above must be in the possession of Cheryl Rentscheler no later than 2:00 p.m. on September 22, 2008.**

**NO RESPONSE**

Contractors not responding to this bid are asked to complete this document and return it to Maricopa County Department of Public Health, 4041 N. Central Avenue, #1400, Phoenix, AZ 85012 or fax to 602/506-6885.

**MARK OUTSIDE ENVELOPE:**

**“PH RFQ 09-014”**

Responses must be received **BY 2:00 P.M., September 22, 2008**. Contractors failing to submit a bid, or this document, may be subject to removal from the Maricopa County Materials Management Contractor List.

**PH RFQ 09-014      TITLE:    TEEN OUTREACH PROGRAM (TOP) PARENT  
MOBILIZER**

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CONTRACTOR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ CONTACT: \_\_\_\_\_

REASON FOR NO BID:

\_\_\_\_\_ Insufficient time

\_\_\_\_\_ Do not handle product/service

\_\_\_\_\_ Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PURPOSE:**

The Maricopa County Department of Public Health (MCDPH), Family Health Partnerships program, Teen Pregnancy Prevention program, is recruiting Parent Mobilizers to conduct Parent classes with the parents/guardians of youth enrolled in the Top Outreach Program (TOP). This is a program for high school students, consisting of three interrelated components: supervised community service, classroom discussion of service experiences, and classroom discussion and activities related to key social and developmental tasks of adolescence.

In the teen classes, participants work in small groups with two facilitators – discussing key elements from a required curriculum. Service learning projects take students into their communities, creating a combination of education and community service that is intended to empower young people to succeed.

In the parent classes, participants learn how to help other parents to support each other with the task of parenting. Parent mobilizers are taught how to facilitate the curriculum, “Can We Talk?” and how to talk with their teens about risky behaviors. Expectations include recruiting parents to come to class and facilitating the classes.

Multiple contracts with successful candidates may be awarded and Maricopa County reserves the right to add contractors to this contract as may be needed to meet County requirements. The anticipated yearly amount to be spent on this contract is approximately \$2,400.

**SCOPE OF WORK:**

Mobilizers will be responsible for:

- Assisting with recruiting parents/guardians to attend classes and participate in program events, maintaining a log of all contacts as well as attempted contacts.
- Preparing and providing lesson plans in advance with the assistance of the TOP staff and coming to group sessions prepared to address the lesson theme.
- Maintain a working file on each family that you have contact with.
- Help TOP Coordinator write a monthly report regarding successes and challenges
- Help maintain the group attendance logs and submit an invoice by the 5<sup>th</sup> of each month to bill the program for the work during the previous month, as appropriate.
- Attend planning meetings with the TOP staff
- If for any reason you find that you are no longer able to serve as a mobilizer, a minimum of 2 weeks written notice is requested.

**REQUIREMENTS TO APPLY:**

Please submit a one page letter describing why you believe you would make a good parent mobilizer for the TOP program and names/contact information of three references.

**QUALIFICATIONS & SELECTION CRITERIA:**

The following qualifications are listed in the order of importance:

- Must be able to attend and lead meetings and trainings in the Maryvale area.
- Ability to comply with the program philosophy when conducting classes
- Ability to demonstrate cultural competency
- Ability to establish rapport with parents of teens
- Must have basic writing skills to document activities

**COMPENSATION:**

Compensation shall be on a fixed price basis and will be paid out upon successful completion of the following deliverables and submittal of an invoice.

1. Compensation for facilitating a class is \$25/class
2. Planning sessions - \$20/session (at least one hour in length)

Contractor signifies its understanding and agreement by signing this document that this contract is a requirements contract. This contract does not guarantee any assignments will be made (minimum or maximum).

Maricopa County reserves the right to accept or reject, in whole or in part, all applicants submitted and/or to cancel this announcement. Any contract awarded shall be based upon the applicant most advantageous to Maricopa County at the discretion of Maricopa County.

**SPECIAL TERMS AND CONDITIONS:****CONTRACT LENGTH:**

This Request for Quotes is for awarding a fixed term contract to cover a 9 month period.

**OPTION TO EXTEND:**

Subject to availability of funds and acceptable Contractor performance, the Contractor hereby acknowledges and agrees that the County shall have the right to extend this Contract for additional periods, not to exceed a total term of five (5) years, except that cost will be subject to renegotiation. Any extension of Contract period must be mutually acceptable to the County and the Contractor and signed by both parties in writing.

ATTACHMENT A

**TEEN OUTREACH PROGRAM PARENT MOBILIZER  
PRICING SHEET**

BIDDER NAME: \_\_\_\_\_  
F.I.D./VENDOR #: \_\_\_\_\_  
BIDDER ADDRESS: \_\_\_\_\_  
P.O. ADDRESS: \_\_\_\_\_  
BIDDER PHONE #: \_\_\_\_\_  
BIDDER FAX #: \_\_\_\_\_  
COMPANY WEB SITE: \_\_\_\_\_  
COMPANY CONTACT (REP): \_\_\_\_\_  
E-MAIL ADDRESS (REP): \_\_\_\_\_

PAYMENT TERMS: BIDDER IS REQUIRED TO SELECT ONE OF THE  
FOLLOWING.

TERMS WILL BE CONSIDERED IN DETERMINING LOW BID.  
FAILURE TO CHOOSE A TERM WILL RESULT IN A DEFAULT TO NET 30.

BIDDER MUST INITIAL THE SELECTION BELOW.

NET 10 \_\_\_\_\_  
NET 15 \_\_\_\_\_  
NET 20 \_\_\_\_\_  
NET 30 \_\_\_\_\_  
NET 45 \_\_\_\_\_  
NET 60 \_\_\_\_\_  
NET 90 \_\_\_\_\_  
2% 10 DAYS NET 30 \_\_\_\_\_  
1% 10 DAYS NET 30 \_\_\_\_\_  
2% 30 DAYS NET 31 \_\_\_\_\_  
1% 30 DAYS NET 31 \_\_\_\_\_  
5% 30 DAYS NET 31 \_\_\_\_\_

COMPENSATION/FEES:

TOTAL:

TEEN OUTREACH MOBILIZER  
(as defined herein)

\$ per rates as described on Page 4

Respondent's signature (below) indicates understanding and agreement with the  
compensation/fees rate which they have indicated above and as shown on attached line  
item budget that shall accompany this page.

\_\_\_\_\_  
Signature (REQUIRED)

\_\_\_\_\_  
Date

ATTACHMENT B  
**CONTRACTOR REFERENCES**

INDIVIDUAL SUBMITTING RFQ: \_\_\_\_\_

1.     COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

2.     COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

3.     COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CONTACT PERSON: \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

ATTACHMENT C

AGREEMENT

The Contractors hereby certify that they have read, understand and agree that acceptance by Maricopa County of the Contractor's offer by the issuance of a Purchase Order or Contract will create a binding Contract. Further, they agree to fully comply with all terms and conditions as set forth in the Maricopa County Procurement Code, and amendments thereto, together with the specifications and other documentary forms herewith made a part of this specific procurement.

**BY SIGNING THIS AGREEMENT THE SUBMITTING INDIVIDUAL CERTIFIES THAT THEY HAVE REVIEWED THE ADMINISTRATIVE INFORMATION AND CONTRACTUAL TERMS AND CONDITIONS LOCATED AT <http://www.maricopa.gov/materials>. AND AGREE TO BE CONTRACTUALLY BOUND TO THEM.**

\_\_\_\_\_

INDIVIDUAL SUBMITTING RFQ \_\_\_\_\_ VENDOR # \_\_\_\_\_

PRINTED NAME AND TITLE \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ FAX # \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ DATE \_\_\_\_\_

WEB SITE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

BY: \_\_\_\_\_  
CHERYL RENTSCHELER, PROCUREMENT OFFICER DATE  
MARICOPA COUNTY DEPT. OF PUBLIC HEALTH

BY: \_\_\_\_\_  
WES BAYSINGER, DIRECTOR DATE  
MARICOPA COUNTY MATERIALS MANAGEMENT

APPROVED AS TO FORM:

COUNTY ATTORNEY \_\_\_\_\_ DATE \_\_\_\_\_

## EXHIBIT 1

### VENDOR REGISTRATION PROCEDURES

**On-line Vendor Registration at Maricopa County is available NOW!**

**On November 22, 2004, Maricopa County changed its vendor registration process.** Paper forms will no longer be accepted. Vendor registrations will only be accepted through the active website. Register at <http://www.maricopa.gov/materials/>

The new process will give you full control over your organizational information. Please be advised however that you are now directly responsible for the presence and accuracy of your company's information.

**Vendors currently registered in our system who have changes to their information or have not registered online must establish a new account via the above web site link. Materials Management will no longer post changes to existing vendor records.**

**Procurement vendors:** Be sure to select those commodity codes that best represent the commodities and or services provided by your organization. Non-procurement registrants may ignore the commodity portion.

Registration is **FREE**. You may use any computer with web access for registration, record updating and maintenance.

If you have any questions, email us at [VendorReg@mail.maricopa.gov](mailto:VendorReg@mail.maricopa.gov).